APPLICATION FOR DEALER PLATES

BUREAU OF MOTOR VEHICLES Dealer Section 6400 E. 30th Street Indianapolis, IN 46219

State Form 23350 (R6 / 1-98)	
Approved by State Board of Accounts, 1998	Date rec
INICTOLICTIONS: DO NOT WRITE IN CHAREN AREAS	

/816	Approved by State Board of Accounts, 1998 INSTRUCTIONS: DO NOT WRITE IN SHADED AREAS.			Date received (month, day, year) Deal		Dealer nur	ealer number	
Indicate type of plates being applied for by checking only one box.			Name of business Telephone number			Telephone number		
A 🗌	Dealer - New F Recreational Vehicle Dealer							
В	B ☐ Manufacturer G ☐ Wholesale Dealer			Address (street and number)				
С	Dealer - Used	H Transfer Dealer						
$D \square$	Mobile Home Dealer	I	- New	City		State	ZIP code	
Ε□	Trailer Dealer	J Motorcycle Dealer	- Used					
CHECK INVOICE - Add Fee and Mailing Charge (if applicable) for Total			al Fee	I hereby certify, under penalty of perjury, that the answers and information contained in this application				
ONE PLATES AND FEES			TOTAL					
	Set of two (2) Dealer plates @ \$45.25			Fee	are true and correct.			
	Set of two (2) Motorcycle Dealer plates @ 20.25			\$	Signature of owner, partner or officer			
	Will Pick Up	ease mail (if so, Mailing Char	ge \$3.00)					
	Application must be accompanied by check or money order. TOTAL FEES		\$	Dealer No.	Typed or p	rinted name and title		

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	☐ Manufacturer G ☐ Wholesale Dealer			Address (street and number)			
	Mobile Home Dealer I ☐ Motorcycle Dealer - New City Trailer Dealer J ☐ Motorcycle Dealer - Used			City	State ZIP code		
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